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FIRST NAMED INVENTOR

Keith J. Allison

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

FILING DATE

10/10/2001

7590

10/09/2003

Jonathan H. Spadt Ratner & Prestia One Westlakes, Berwyn, Suite 301 P.O. Box 980 Valley Forge, PA 19482-0980

APPLICATION NO.

09/974,700

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(Depositor's name)	ın	Denise Morgan	
(Signatore)	morra_	(Inuse)	
(Date)	. J	12/17/03	
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CONFIRMATION NO.

9323

ATTORNEY DOCKET NO.

BIN-105US

APPLN. TYPE	SMALL ENTITY	ISSUE F	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$1330 \$300 \$		01/09/2004	
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Address form PTO/SB/I "Fee Address" indicat	tence address (or Change of C 22) attached. ion (or "Fee Address" Indicat or more recent) attached. Use	ion form	agents OR, altern firm (having as a agent) and the n	3 registered patent natively, (2) the nan n member a registere ames of up to 2 reg its. If no name is list	ne of a single ed attorney or 2 gistered patent	rPrestia
. ASSIGNEE NAME ANI	O RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (print	or type)		<u></u>
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN				e patent. Inclusion o tion of this form is N 'Y and STATE OR C	f assignee data is only appropr OT a substitute for tiling an ass COUNTRY)	iate when an assignment b signment.
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(Authorized Signature Jonatham H. Spadt, Rege) No. 45,122

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PTO/SB/21 (08-03) (AW 10/2003)
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10 #5

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 5

	<u> </u>	
Application Number	09/974,700	
Filing Date	10/10/2001	
First Named Inventor	Keith J. Allison	
Art Unit	1714	
Examiner Name	Callie E. Shosho	
Attorney Docket No.	BIN-105US	

ENCLOSURES (Check all that apply)									
Fee Transmittal Form Fee Attached	Drawing(s) Licensing-related Papers	After Allowance Communication to Group							
Amendment/Reply After Final Affidavits/Declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s)	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation, Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s)	Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): Issue Fee transmittal (in dup)							
Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY OR AGENT									
Firm or Individual Signature Jonathan H. Spadt	Registration No. (Attorney/Ag	gent) 45,122							
Date	DEC. 17,2003								
CERTIFICATE OF TRANSMISSION / MAILING									
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:									
Name (Print/Type) Denise Morgan									
Signature	Mora	Date 12-17-63							

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PTO/SB/17 (10-03) (AW 12/2003)

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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	166
(a)	10

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		Complete if Known
	Application Number	09/974,700
	Filing Date	10/10/2001
	First Named Inventor	Keith J. Allison
-	Examiner Name	Callie E. Shosho
	Art Unit	1714
	Attorney Docket No.	BIN-105US

Check Credit Card Money Other None Order Order S Deposit Account: 3. ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Description	_
Fee	
Deposit Account: Code (\$) Code (\$)	Fee Paid
Deposit 1051 130 2051 65 Surcharge - late filing fee or oath	
Account Number 18-0350 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.	
Deposit Account RatnerPrestia 1053 130 1053 130 Non-English specification	
The Director is authorized to: (check all that apply) 1812 2,520 For filing a request for ex parte reexamination	
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below ☐ I804 920* Requesting publication of SIR prior to ☐ Examiner action	
☐ Charge any additional fee(s) or any underpayment of fee(s) ☐ Charge fee(s) indicated below, except for the filing fee to the	
above-identified deposit account. 1251 110 2251 55 Extension for reply within first month	
FEE CALCULATION 1252 420 2252 210 Extension for reply within second month	
1. BASIC FILING FEE 1253 950 2253 475 Extension for reply within third month	,
Large Entity Small Entity 1254 1,480 2254 740 Extension for reply within fourth month	
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid 1255 2,010 2255 1,005 Extension for reply within fifth month	
1001 770 2001 385 Utility filing fee 1401 330 2401 165 Notice of Appeal	
1002 340 2002 170 Design filing fee 1402 330 2402 165 Filing a brief in support of an appeal	
1003 530 2003 265 Plant filing fee 1403 290 2403 145 Request for oral hearing	
1004	
1452 110 2452 55 Petition to revive – unavoidable	
SUBTOTAL (1) (\$) 0	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from Fee 1501 1,330 2501 665 Utility issue fee (or reissue)	330.
Claims below Paid 1502 480 2502 240 Design issue fee	
Total Claims -20** = 0 X = 0 1503 640 2503 320 Plant issue fee	
Independent Claims -3** = 0 X = 0 1460 130 Petitions to the Commissioner	
Multiple Dependent X = 0 1807 50 Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity 1806 180 1806 Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Description 8021 40 Recording each patent assignment per Code (\$) Code (\$)	
property (times number of properties) 1202 18 2202 9 Claims in excess of 20 1809 770 2809 385 Filing a submission after final rejection (37	
1201 86 2201 43 Independent claims in excess of 3 CFR § 1.129(a))	
** Reissus independent dalins over examined (37 CFR § 1.129(b))	
1204 86 2204 43 Original patent 1801 770 2801 385 Request for Continued Examination (RCE)	
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent" 1802 900 Request for expedited examination of a design application	
	30.
*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1660	

SUBMITTED BY	Con	nplete (if applicable)			
Name (Print/Type)	Jonathan H. Spadt	Registration No. Attorney/Agent)	45,122	Telephone	610-407-0700
Signature	スプラン	Joseph Joseph			12/17/03

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